

ISSUE SLIP STAPLE AREA (for additional cross references)

PGS TO:	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	RMIS	10076	4-2-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1		5	10
2		15	10
3		25	10
4		35	10
5		45	10
6		55	10
7		65	10
8		75	10
9		85	10
10		95	10
11		105	10
12		115	10
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14		135	10
15		145	10
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25		245	10
26		255	10
27		265	10
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30		295	10
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33		325	10
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36		355	10
37		365	10
38		375	10
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40		395	10
41		405	10
42		415	10
43		425	10
44		435	10
45		445	10
46		455	10
47		465	10
48		475	10
49		485	10
50		495	10

Claim	Final	Original	Date
51		1	10
52		2	10
53		3	10
54		4	10
55		5	10
56		6	10
57		7	10
58		8	10
59		9	10
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93		43	10
94		44	10
95		45	10
96		46	10
97		47	10
98		48	10
99		49	10
100		50	10

Claim	Final	Original	Date
101		1	10
102		2	10
103		3	10
104		4	10
105		5	10
106		6	10
107		7	10
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142		42	10
143		43	10
144		44	10
145		45	10
146		46	10
147		47	10
148		48	10
149		49	10
150		50	10

If more than 150 claims or 10 actions  
 staple additional sheet here

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